## School District Administrative Claiming Or Administrative Case Management Statement (A separate statement is required for each school district)

Name of School District	t
Does not participate in:	
School District Administrative Claiming (SDAC) or (via Maximus) (Please check the boxes that apply)	Administrative Case Management (ACM)
Does participate in:	
School District Administrative Claiming (SDAC) or (via Maximus) (Please check one of the above boxes)	Administrative Case Management (ACM)
If participating, has your district:	
Just started, not billed. Please describe below how fu	anding will be used.
Billed, but not received reimbursement. Please descr	ribe below how funding will be used.
Received reimbursement. Please describe below how	v funding is being used.
Funding usage:	
Signed by:	